

CLAIMS ONLY						Application Number 10710297		Filing Date			
						Applicant(s)					
						* May be used for additional claims or amendments					
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT						
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend
1	1						51				
2		1					52				
3		1					53				
4		1					54				
5		1					55				
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45							95				
46							96				
47							97				
48							98				
49							99				
50							100				
Total Indep	1						Total Indep				
Total Depend	6						Total Depend				
Total Claims	7						Total Claims				